

**Bureau of Alcoholic Beverages  
and Lottery Operations  
Division of Liquor Licensing &  
Enforcement**



**BUREAU USE ONLY**

License No. Assigned:

Class:

Deposit Date:

Amt. Deposited:

Promise by any person that he or she can expedite a liquor license through influence should be completely disregarded.

To avoid possible financial loss an applicant, or prospective applicant, should consult with the Division before making any substantial investment in an establishment that now is, or may be, attended by a liquor license.

**PRESENT LICENSE EXPIRES \_\_\_\_\_**

**Application for Retail Sales at a Farmer's Market for a Brewery or Winery**

**Current Brewery or Winery License Number: \_\_\_\_\_ Expiration Date \_\_\_\_\_**

**INDICATE TYPE OF PRIVILEGE: ☐ MALT ☐ VINOUS**

**APPLICATION FEE.....\$75.00 (Fee is annual)**

**FILING FEE.....\$10.00**

**NOTE:** If the place of business is located in an unincorporated place, the application must be approved by the County Commissioners.  
All such applications shall be accompanied by receipt of payment of the \$10.00 filing fee to the County Treasurer.

**Check Payable: Treasurer State of Maine**

**ALL QUESTIONS MUST BE ANSWERED IN FULL**

|   |       |            |                                 |       |            |
|---|-------|------------|---------------------------------|-------|------------|
| <b>1. APPLICANT(S)</b> –(Sole Proprietor, Corporation, Limited Liability Co., etc.) |       |            | <b>2. Business Name (D/B/A)</b> |       |            |
| DOB:  |       |            |                                 |       |            |
| DOB:  |       |            |                                 |       |            |
| DOB:  |       |            | Location (Street Address)       |       |            |
| Address   |       |            | City/Town                       | State | Zip Code   |
|   |       |            | Mailing Address                 |       |            |
| City/Town   | State | Zip Code   | City/Town                       | State | Zip Code   |
| Telephone Number  |       | Fax Number | Business Telephone Number       |       | Fax Number |
| Federal I.D. #  |       |            | Seller Certificate #            |       |            |

Dated at: \_\_\_\_\_ on \_\_\_\_\_, 20 \_\_\_\_\_  
Town/City, State Date

**Please sign in blue ink**

\_\_\_\_\_  
Signature of Applicant or Corporate Officer(s)

\_\_\_\_\_  
Signature of Applicant or Corporate Officer(s)

**The licensee shall submit the application 30 days prior to the date when wine or malt liquor is to be sold at a farmer's market**

**Notification of date and address of each farmer’s market we intend to sell wine or malt liquor**  
**This notification must be received prior to month of farmer’s market and approval of bureau returned**

|           |              |
|-----------|--------------|
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |
| Date_____ | Address_____ |

|                                  |  |
|----------------------------------|--|
| <b>Space for Bureau Approval</b> |  |
|----------------------------------|--|